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PTO/SB/01 (12-97)

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## **Attorney Docket Number** 1/1268b **DECLARATION FOR UTILITY OR** Kai DONSBACH First Named Inventor DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) 10 / 283,440 **Application Number** 10/30/2002 Filing Date Declaration Submitted after Initial □ Declaration Submitted OR Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing **Examiner Name**

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Crystalline Form Of Telmisartan Sodium								
the specification of which (Title of the Invention)  is attached hereto  OR								
was filed on (MM/DD/YYYY) 10/30/2002 as United States Application Number or PCT International								
Application Number 10/283,440 and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as								
amended by any amendme	ent specifically referred to abo	ove.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?YES NO				
DE 101 53 737.9	Germany	10/31/2001	0000	<b>M</b> 0000				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Numbe	·	e (MM/DD/YYYY)						
60/351,443	01/24/2002		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
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[Page 1 of 2]
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## **DECLARATION** — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								in the prior to disclose			
U.S. Parent Application or PCT Parent Number			Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)					
Additional	Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							ereto.			
As a named inve	entor, i h	ereby appoint the follow	ing registered pr	actitioner(	s) to pr	osecute t	his applicatio	n and to tr	nsact		
and Trademark	Office co	nnected therewith:	Customer Num OR	ber				<b>→</b>		Place Custo Number Bar	
			Registered prac	ctitioner(s)	name/	registratio	on number lis	ted below	<u> </u>	Label he	·e
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Robert P. F			25,089	·	Susan K. Pocc			hiari	-	45,016	****
Alan R. Ste	•		28,991			Philip I. Datlow			41,482		
Mary-Ellen			27,928				hy X. Wit	kowski		40,232	
Anthony P.		<del></del>	41,629		David A. Dow				46,124		
L_I Additional r	egistered	d practitioner(s) named of	on supplemental	Registere	d Pract	itioner In	formation she	et PTO/SE	V02C a	attached here	to.
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of So	le or F	irst Inventor:				A petitio	n has been	filed for t	nis un	signed inve	ntor
Given Name (first and middle [if any])				Family Name or Surname							
Kai	(1)				DONSBACH						
Inventor's Signature		Van	lung				·			Date	11/00
Residence: C	ity	Hargesheim	State		country Germany citiz		Citizenship	DE			
Post Office A	Post Office Address Kronenbergstrasse 19										
Post Office A	ddress										
City		Hargesheim <sub>State</sub>		ZIP		555	595	Count	y (	Germany	
D Additional	invente	re are being named a	nn tha 1 air	nnlomest		ditional I	nventer/c\ c	hoot/c\ E	TOIS	D/024 att-	had bar-t

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_1\_ of \_1\_

		•					
Name of Additional Joint Inventor, if ar		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname				
Irmgard HOF							
Inventor's Signature Vingala Hof	<i>;</i>				Date 11/20/200		
Residence: City Ingelheim am Rhein	Ingelheim am Phoin			ny	DE Citizenship		
Rembrandtstrasse 10 Mailing Address							
Mailing Address							
City Ingelheim am Rhein	State		ZIP 55218	Germany			
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any]	)		Family Name or Surname				
Inventor's Signature					Date		
Residence: City	State		Country		Citizenship		
Mailing Address							
Mailing Address							
City	State		ZIP	Cou	intry		
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Sumame				
				·			
Inventor's Signature	·	<u> </u>			Date		
Residence: City	State		Country		Citizenship		
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Mailing Address							
City	State		ZIP	C	ountry		

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Case No. 1/1268b